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Image# 201602109008453401

**FEC** 

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

FURIVI 3X	For Other Than An Autl	norized Committe	ee		Office Use Only
1. NAME OF	TYPE OR PRINT ▼	Example: If typin	ng, type	12FE4M5	
COMMITTEE (in full)		over the lines.			
SOCIETY OF THORA	CIC SURGEONS PO	LITICAL ACTIC	ON COMM		
ADDRESS (number and street)	20 F STREET, NW				
Check if different	SUITE 310 C				
than previously reported. (ACC)	WASHINGTON			DC	20001-6704
2. FEC IDENTIFICATION N	UMBER ▼ CIT	Y <b>A</b>	S	STATE 🛦	ZIP CODE ▲
C C00325936			IEW N) <b>OR</b>	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly X Feb Report Due On:	20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		20 (M3)	lun 20 (M6)	H	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (0	O1)		Jul 20 (M7)		20 (M10) Jan 31 (YE)
July 15 Quarterly Report (0	PRE-Election	Primary (12P		General (	
October 15 Quarterly Report (0	Report for the:	Convention (	12C)	Special (	128)
January 31 Year-End Report (	YE) Electio	n on	D D /	Y    Y    Y    Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (300	à)	Runoff (3	0R) Special (30S)
Termination Report (TER)		n on	D	Y	in the State of
5. Covering Period 0	1 01 2016	through	01	/ 31 /	2016
certify that I have examined the	nis Report and to the best of	my knowledge and b	pelief it is true	e, correct and	I complete.
Type or Print Name of Treasure	er DR. DOUGLAS J. MATHISE	EN			
Signature of Treasurer DR.	DOUGLAS J. MATHISEN	[Electronically	Filed] Da	ate 02	10 / 2016
NOTE: Submission of false, error	neous, or incomplete information	n may subject the pers	son signing thi	s Report to th	ue penalties of 2 U.S.C. §437a.
Office Use			3 3 4		FEC FORM 3X Rev. 12/2004
Only					⊓€v. 1∠/∠∪∪4

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

#### SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	(a) Cash on Hand  January 1,  2016		87332.49
	(b) Cash on Hand at Beginning of Reporting Period	87332.49	
	(c) Total Receipts (from Line 19)	43257.00	43257.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	130589.49	130589.49
7.	Total Disbursements (from Line 31)	10131.89	10131.89
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	120457.60	120457.60
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

I. Receipts	COLUMN A	COLUMN B Calendar Year-to-Date					
11. Contributions (other than loans) From:	Total Tills Fellou Cal						
(a) Individuals/Persons Other							
Than Political Committees							
(i) Itemized (use Schedule A)	39785.00	39785.00					
(**) 11 - 12 1	2470.00	3472.00					
(ii) Unitemized (iii) TOTAL (add	3472.00	3472.00					
Lines 11(a)(i) and (ii)	▶ 43257.00	43257.00					
(b) Political Party Committees		0.00					
(c) Other Political Committees	0.00	0.00					
(such as PACs)(d) Total Contributions (add Lines		3.00					
11(a)(iii), (b), and (c)) (Carry							
Totals to Line 33, page 5)	▶ 43257.00	43257.00					
12. Transfers From Affiliated/Other							
Party Committees	0.00	0.00					
13. All Loans Received	0.00	0.00					
13. All Loans Received		0.00					
14. Loan Repayments Received	0.00	0.00					
15. Offsets To Operating Expenditures		7 7					
(Refunds, Rebates, etc.)							
(Carry Totals to Line 37, page 5)		0.00					
16. Refunds of Contributions Made	7						
to Federal Candidates and Other							
Political Committees	0.00	0.00					
17. Other Federal Receipts							
(Dividends, Interest, etc.)		0.00					
<ol> <li>Transfers from Non-Federal and Levin</li> <li>(a) Non-Federal Account</li> </ol>	Funds						
(from Schedule H3)	0.00	0.00					
(nom concado no)		0.00					
(b) Levin Funds (from Schedule H5)	0.00	0.00					
(a) Leviii i unae (iieiii eeneaale rie)							
(c) Total Transfers (add 18(a) and 18(b)	0.00	0.00					
19. Total Receipts (add Lines 11(d),							
12, 13, 14, 15, 16, 17, and 18(c))	▶ 43257.00	43257.00					
20. Total Federal Receipts							
(subtract Line 18(c) from Line 19)	▶ 43257.00	43257.00					
(-,							

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period			
. Operating Expenditures:  (a) Allocated Federal/Non-Federal	iotai iilio i Gilou	Calendar Year-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(") No. 5. b. d Ob.	0.00	0.00		
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00		
Expenditures	1131.89	1131.89		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b)) ▶	1131.89	1131.89		
Transfers to Affiliated/Other Party	2.22	0.00		
Committees Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	9000.00	9000.00		
Independent Expenditures	0.00	0.00		
(use Schedule E)				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other				
Than Political Committees	0.00	0.00		
(1) 5 100 15 15 15	0.00	0.00		
(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
(4.4.4 4.1.6.5 4.1.4 (4.7.4 4.1.4 (4.7.4 4.1.4 (4.7.4 4.1.4 4				
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely				
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	10131.89	10131.89		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	10131.89	10131.89		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	43257.00	43257.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	43257.00	43257.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1131.89	1131.89		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	1131.89	1131.89		

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE	6	OF	29		
(che	ck only								
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	13		14		15	16	,	17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SUF	RGEONS POLITICAL ACTION CO	MMITTEE
Full Name (Last, First, Middle Initial) DR. KEVIN D. ACCOLA		Date of Receipt
Mailing Address 5143 CRANES POINT		01 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.6633
ORLANDO	FL 32839	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
CV SURGEONS, PA	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  DR. MICHAEL BANBURY		Date of Receipt
Mailing Address P.O. BOX 249		01 26 2016
City	State Zip Code	Transaction ID : SA11AI.6752
ROCKLAND	DE 19732	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer CHRISTIANA CARE HEALTH SYSTEM	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial)  DR. JOSEPH E. BAVARIA		Date of Receipt
Mailing Address 3400 SPRUCE STREET		01 25 2016
City	State Zip Code	Transaction ID : SA11AI.6707
PHILADELPHIA	PA 19104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
UNIVERSITY OF PENNSYLVANIA	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	2365.00
TOTAL This Period (last page this line numbe	r only)	

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(che								
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or for commercial purposes, other than using	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC S	URGEONS POLITICAL ACTION C	OMMITTEE
Full Name (Last, First, Middle Initial)  DR. THOMAS M. BEAVER		Date of Receipt
Mailing Address 11452 27TH AVENUE		01 25 2016
City	State Zip Code	Transaction ID : SA11AI.6708
GAINESVILLE	FL 32608	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
UNIVERSITY OF FLORIDA	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial)  DR. SHANDA H. BLACKMON	1	Date of Receipt
Mailing Address 2498 HAWK HILL LANE S	SOUTHWEST	M = M / D = D / Y = Y = Y
City	01 24 2016	
ROCHESTER	State Zip Code MN 55902	Transaction ID : SA11AI.6669
_	00002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
MAYO CLINIC	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. DR. JOHN H. CALHOON		Date of Receipt
Mailing Address 24 ARNOLD PALMER		01 24 2016
City SAN ANTONIO	State Zip Code TX 78229	Transaction ID : SA11AI.6673  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
UT HEALTH SCIENCE CENTER	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1000.00	
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional	ıl)	1865.00
TOTAL This Period (last page this line num	nber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FC	FOR LINE NUMBER:				PAGE	8	OF	29	
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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SU	IRGEONS POLITICAL ACTION CO	DMMITTEE
Full Name (Last, First, Middle Initial) DR. ANDREA J. CARPENTER  Mailing Address 29030 CLOUD CROFT LA	NE	Date of Receipt
City FAIR OAKS RANCH  FEC ID number of contributing federal political committee.  Name of Employer  UT HEALTH SCIENCE CENTER  Receipt For:	State Zip Code TX 78015  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼	01 25 2016 Transaction ID : SA11AI.6637 Amount of Each Receipt this Period 500.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	500.00	
Mailing Address 2618 WEST NEWTON STR		Date of Receipt  O1 25 2016
City SEATTLE  FEC ID number of contributing federal political committee.	State Zip Code WA 98199	Transaction ID : SA11AI.6709  Amount of Each Receipt this Period  365.00
Name of Employer UNIVERSITY OF WASHINGTON	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) DR. JOSEPH C. CLEVELAND Mailing Address 9176 EAST WESLEY AVE	NUE	Date of Receipt
City DENVER	State Zip Code CO 80231	01 25 2016  Transaction ID : SA11Al.6640  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer  UNIVERSITY OF COLORADO  Receipt For:  Primary General  Other (specify) ▼	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  2500.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	3365.00
TOTAL This Period (last page this line numb	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SU	JRGEONS POLITICAL ACTION CC	DMMITTEE
Full Name (Last, First, Middle Initial)  A. DR. ROBBIN G. COHEN  Mailing Address 296 WEST ORANGE GRO	OVE AVENUE	Date of Receipt
City ARCADIA	State Zip Code CA 91006	01 25 2016  Transaction ID : SA11Al.6641  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer USC SCHOOL OF MEDICINE Receipt For:	Occupation PHYSICIAN	-
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial)  DR. JOSEPH A. DEARANI  Mailing Address 4424 ETTENMOOR LANE	SOUTHWEST	Date of Receipt
City ROCHESTER	State Zip Code MN 55902	01 25 2016  Transaction ID : SA11Al.6642  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer MAYO CLINIC	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  DR. J. MICHAEL DIMAIO		Date of Receipt
Mailing Address 6125 LUTHER LANE	Chata Zin Coda	01 25 2016
City DALLAS	State Zip Code TX 75225	Transaction ID : SA11AI.6643  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
SUBTOTAL of Receipts This Page (optional	)	2500.00
TOTAL This Period (last page this line num	ber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SUR	GEONS POLITICAL ACTION CO	MMITTEE
Full Name (Last, First, Middle Initial) DR. FRED H. EDWARDS  Mailing Address 4646 CARLTON DUNES DRI	VE	Date of Receipt
City AMELIA	State Zip Code FL 32034	01 25 2016  Transaction ID : SA11Al.6710  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer  RETIRED  Receipt For:  Primary General  Other (specify) ▼	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  B. DR. RICHARD K. FREEMAN  Mailing Address 11685 BRADFORD PLACE		Date of Receipt  0.1 25 2016
City CARMEL FEC ID number of contributing federal political committee.	State Zip Code IN 46033	Transaction ID : SA11Al.6644  Amount of Each Receipt this Period  500.00
Name of Employer ST. VINCENT MEDICAL GROUP  Receipt For:  Primary General Other (specify) ▼	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  DR. DAVID A. FULLERTON  Mailing Address 375 LAFAYETTE STREET	State Zin Code	Date of Receipt  O1 24 2016
City DENVER  FEC ID number of contributing federal political committee.	State Zip Code CO 80045	Transaction ID : SA11AI.6677  Amount of Each Receipt this Period  500.00
Name of Employer  UNIVERSITY OF COLORADO  Receipt For:  Primary General  Other (specify) ▼	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  500.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1500.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC S	URGEONS POLITICAL ACTION C	OMMITTEE
Full Name (Last, First, Middle Initial)  DR. FREDERICK L. GROVER		Date of Receipt
Mailing Address 3000 EAST CEDAR AVE		01 25 2016
City	State Zip Code	Transaction ID : SA11AI.6647
DENVER	CO 80209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	-
UNIVERSITY OF COLORADO	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  DR. T. SLOANE GUY		Date of Receipt
Mailing Address 450 EAST 63RD STREE	Г	M = M / D = D / Y = Y = Y
City	State Zip Code	01 25 2016
NEW YORK	NY 10021	Transaction ID : SA11AI.6714
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
CORNELL MEDICINE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. DR. ROBERT A. GUYTON	1	Date of Receipt
Mailing Address 3342 PACES FERRY AV		01 25 2016
City ATLANTA	State Zip Code GA 30339	Transaction ID : SA11AI.6715
	GA 30339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
EMORY HEALTHCARE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	ıl)	1750.00
	·	
TOTAL This Period (last page this line num	nber only)	

FOR LINE NUMBER:					PAGE		12	OF	29	
(check only one)										
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	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC S	URGEONS POLITICAL ACTION CO	OMMITTEE
Full Name (Last, First, Middle Initial)  DR. JOHN W. HAMMON		Date of Receipt
Mailing Address 1001 DALTON ROAD		01 25 2016
City	State Zip Code	Transaction ID : SA11AI.6648
LEWISVILLE	NC 27023	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
WAKE FOREST UNIVERSITY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  3. DR. JOHN R. HANDY	1	Date of Receipt
Mailing Address 4805 NORTHEAST GLIS	01 25 2016	
City	State Zip Code	Transaction ID : SA11AI.6716
PORTLAND	OR 97213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer PROVIDENCE CANCER CENTER	Occupation PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2871 ACTON ROAD		01 25 2016
City	State Zip Code	Transaction ID : SA11AI.6717
BIRMINGHAM	AL 35243	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
CT SURGEONS, PC	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	il)	1750.00
TOTAL This Period (last page this line num	nber only)	

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	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC S	SURGEONS POLITICAL ACTION C	OMMITTEE
Full Name (Last, First, Middle Initial)  DR. ROBERT HIGGINS		Date of Receipt
Mailing Address 1030 PONTIAC ROAD		01 26 7 2016
City WILMETTE	State Zip Code IL 60091	Transaction ID : SA11AI.6757
	IE 00091	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
JOHNS HOPKINS	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial)  B. DR. ANTHONY HOLDEN	<u>'</u>	Date of Receipt
Mailing Address 311 NORTH MCLEAN B	OULEVARD	01 25 _2016 _
City	State Zip Code	Transaction ID : SA11AI.6718
MEMPHIS	TN 38112	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer METHODIST HEALTHCARE	Occupation	
Receipt For:	PHYSICIAN	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  C. DR. KEITH A. HORVATH		Date of Receipt
Mailing Address 4839 WESTERN AVENU	JE	01 25 2016
City WASHINGTON	State Zip Code DC 20016	Transaction ID : SA11AI.6649  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	_
JOHNS HOPKINS PHYSICIANS	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	1000.00	
	7	
SUBTOTAL of Receipts This Page (optional	al)	1615.00
TOTAL This Period (last page this line num	nber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DR. MICHAEL JESSEN	JAGEONS FOLITICAL ACTION CC	
Mailing Address 5323 HARRY HINES BOU	ILEVARD	Date of Receipt  01 26 2016
City	State Zip Code	Transaction ID : SA11AI.6758
DALLAS	TX 75390	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
UT SOUTHWESTERN MEDICAL CENTER	PHYSICIAN'	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) DR. KIRK B. KANTER		Date of Receipt
Mailing Address 2370 BRIARCLIFF COMM	ONS	01 25 2016 _
City	State Zip Code	Transaction ID : SA11AI.6721
ATLANTA	GA 30345	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer EMORY UNIVERSITY	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial) DR. NICHOLAS T. KOUCHOU	KOS	Date of Receipt
Mailing Address 25 PICARDY LANE		01 25 _2016 _
City ST. LOUIS	State Zip Code MO 63124	Transaction ID : SA11AI.6722  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
CT&V SURGERY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number)	<u> </u>	1500.00

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or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SU	IRGEONS POLITICAL ACTION CO	OMMITTEE
Full Name (Last, First, Middle Initial)  DR. STEPHEN J. LAHEY		Date of Receipt
Mailing Address 22 BUTTONWOOD LANE		01 25 2016
City	State Zip Code	Transaction ID : SA11AI.6652
IPSWICH	MA 01938	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
UCONN HEALTH CENTER	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial)  DR. RAJ B. LAL	·	Date of Receipt
Mailing Address 2809 MEYERS ROAD		M = M / D = D / Y = Y = Y
City	State Zip Code	01 25 2016
OAK BROOK	IL 60523	Transaction ID : SA11Al.6725
	0.020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
RETIRED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  DR. RICHARD LEE		Date of Receipt
Mailing Address 48 PICARDY		01 25 2016
City	State Zip Code	Transaction ID : SA11AI.6653
LADUE	MO 63124	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
ST. LOUIS UNIVERSITY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1000.00	
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1615.00
TOTAL This Period (last page this line numb	ner only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	. 1	16	OF		29
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SUF	RGEONS POLITICAL ACTION CO	MMITTEE
Full Name (Last, First, Middle Initial)  DR. THOMAS E. MACGILLIVRAY  Mailing Address 112 MOUNT VERNON STRE	ΕΤ	Date of Receipt
		01 24 2016
City BOSTON	State Zip Code MA 02108	Transaction ID : SA11AI.6681  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer  MASSACHUSETTS GENERAL HOSPITAL	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  3. DR. MITCHELL J. MAGEE  Mailing Address 6457 NORWAY ROAD		Date of Receipt
City DALLAS	State Zip Code TX 75230	01 25 2016  Transaction ID : SA11AI.6654  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer HEALTH CORPORATION OF AMERICA	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  DR. JAMES R. MARTIN		Date of Receipt
Mailing Address 847 WHITTIER		01 24 2016 _
City GROSSE POINTE PARK	State Zip Code MI 48230	Transaction ID : SA11AI.6682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer  CENTER FOR CV&T SURGERY	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		2500.00
TOTAL This Period (last page this line number	only)	

FOR LIN	PAGE	1	17	OF		29					
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or for commercial purposes, other than using the	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SUR	GEONS POLITICAL ACTION CO	MMITTEE
Full Name (Last, First, Middle Initial)  A. DR. DOUGLAS J. MATHISEN		Date of Receipt
Mailing Address 60 PINE STREET		01 25 2016
City DOVER	State Zip Code MA 02030	Transaction ID : SA11AI.6655
FEC ID number of contributing federal political committee.	C 02030	Amount of Each Receipt this Period
Name of Employer  MASSACHUSETTS GENERAL HOSPITAL  Receipt For:  Primary General  Other (specify) ▼	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial)  DR. THOMAS L. MATTHEW  Mailing Address 7105 QUIET RETREAT COU		Date of Receipt
City NIWOT	State Zip Code CO 80503	01 25 2016  Transaction ID : SA11Al.6656  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer UNIVERSITY OF COLORADO HEALTH	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 44 SKYLINE DRIVE		01 25 2016
City WELLESLEY	State Zip Code MA 02482	Transaction ID : SA11AI.6657  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
CHMC CV SURGICAL FOUNDATION	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	<u>-</u>	2500.00

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using t	the name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SU	RGEONS POLITICAL ACTION CO	MMITTEE				
Full Name (Last, First, Middle Initial)  DR. RITA MILEWSKI  Mailing Address 130 SOUTH 18TH STREET	Г	Date of Receipt				
City PHILADELPHIA  FEC ID number of contributing federal political committee.  Name of Employer UNIVERSITY OF PENNSYLVANIA	State Zip Code PA 19103  C  Occupation PHYSICIAN	01 26 2016  Transaction ID : SA11AI.6763  Amount of Each Receipt this Period  250.00				
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  250.00					
Full Name (Last, First, Middle Initial)  3. DR. J. SCOTT MILLIKAN  Mailing Address 3319 ALPINE DRIVE		Date of Receipt  01 25 2016				
City BILLINGS FEC ID number of contributing	State Zip Code MT 59102	Transaction ID : SA11AI.6658  Amount of Each Receipt this Period  500.00				
federal political committee.  Name of Employer BILLINGS CLINIC	Occupation PHYSICIAN					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name (Last, First, Middle Initial) DR. KEITH S. NAUNHEIM Mailing Address 52 MIDDLESEX DRIVE		Date of Receipt				
City ST. LOUIS	State Zip Code MO 63144	Transaction ID : SA11AI.6684  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	1000.00				
Name of Employer  ST. LOUIS UNIVERSITY  Receipt For:  Primary General  Other (specify) ▼	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  1000.00					
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	1750.00				
TOTAL This Period (last page this line number	er only)					

FOR LINE NUMBER:						PAGE	 19	OF	29
(check only one)									
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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SI	URGEONS POLITICAL ACTION C	OMMITTEE
Full Name (Last, First, Middle Initial)  DR. FRANCIS C. NICHOLS		Date of Receipt
Mailing Address 1034 WEATHERHILL LAI		01 25 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.6660
ROCHESTER	MN 55902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer	Occupation	
MAYO CLINIC	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	750.00	
Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial)  B. DR. JAMES E. O'BRIEN		Date of Receipt
Mailing Address 11732 HIGH DRIVE	01 15 2016 .	
City	State Zip Code	Transaction ID : SA11AI.6627
LEAWOOD	KS 66211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
CHILDREN'S MERCY HOSPITAL	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  DR. G. ALEXANDER PATTER	SON	Date of Receipt
Mailing Address 18 SOUTHMOOR DRIVE		01 24 _ 2016 _
City	State Zip Code	Transaction ID : SA11AI.6685
CLAYTON	MO 63105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
WASHINGTON UNIVERSITY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1000 00	
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	2000.00
TOTAL This Period (last page this line num	ber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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r for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	ing the name and address of any political committee to	o solicit contributions from such committee.
	SURGEONS POLITICAL ACTION CO	MMIIIEE
Full Name (Last, First, Middle Initial) DR. ROMAN PETROV		Date of Receipt
Mailing Address 5504 13TH AVENUE		01 25 2016
City	State Zip Code	Transaction ID : SA11AI.6729
VIENNA	WV 26105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
MARIETTA MEMORIAL	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) DR. RICHARD L. PRAGER	1	Date of Receipt
Mailing Address 3301 TIMBERWOOD LA	NE	01 24 _2016 _
City	State Zip Code	Transaction ID : SA11AI.6686
ANN ARBOR	MI 48103	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	1000.00
Name of Employer	Occupation	
UNIVERSITY OF MICHIGAN	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)	NI	Data of Bassist
DR. JAMES M. REINERSMAI		Date of Receipt
Mailing Address 708 NEWPORT BRIDGE		01 26 2016
City EDMOND	State Zip Code OK 73034	Transaction ID : SA11AI.6698  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
UNIVERSITY OF OKLAHOMA	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	. 199. 199. 100. 10 10 10 10	
Other (specify) ▼	365.00	
SUBTOTAL of Receipts This Page (option	al)	1865.00
	al)	
TOTAL This Period (last page this line nur	mber only)	

	FOR LINE NUMBER:						PAGE	2	21	OF		29
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or for commercial purposes, other than using	ng the name and address of any political committee	
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC S	SURGEONS POLITICAL ACTION C	OMMITTEE
Full Name (Last, First, Middle Initial)  A. DR. JEFFREY B. RICH		Date of Receipt
Mailing Address 1055 LASKIN ROAD		01 25 _ 2016 _
City	State Zip Code	Transaction ID : SA11AI.6733
VIRGINIA BEACH	VA 23451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
RETIRED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  DR. PAUL ROBISON	<u>'</u>	Date of Receipt
Mailing Address 138 WHISPERING WILL	LOW COURT	M = M / D = D / Y = Y = Y
City	State Zip Code	01 25 2016 Transaction ID : \$444A16734
CAPE GIRARDEAU	MO 63701	Transaction ID : SA11AI.6734  Amount of Each Receipt this Period
FEC ID number of contributing	00.0	Amount of Lacri Receipt this Feriod
federal political committee.	C	500.00
Name of Employer	Occupation	
SOUTHEAST HEALTH	PHYSICIAN	_
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  DR. THOMAS SCHWANN		Date of Receipt
Mailing Address 4627 BROOKSIDE ROA	AD	01 26 2016
City	State Zip Code	Transaction ID : SA11AI.6767
OTTAWA HILLS	OH 43165	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	_
UNIVERSITY OF TOLEDO	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1000.00	
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (options	al)	2500.00
TOTAL This Period (last page this line nur	mber only)	

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	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SUF	RGEONS POLITICAL ACTION CC	DMMITTEE
Full Name (Last, First, Middle Initial)  A. DR. WALTER J. SCOTT		Date of Receipt
Mailing Address 1464 HUNTER ROAD		01 26 _ 2016 _
City	State Zip Code	Transaction ID : SA11AI.6700
JENKINTOWN	PA 19046	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
FOX CHASE CANCER CENTER	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial)  3. WILLIAM F. SEWARD		Date of Receipt
Mailing Address 2312 FORESTVIEW ROAD		01 24 _ 2016 _
City	State Zip Code	01 24 2016 Transaction ID : SA11Al.6687
EVANSTON	IL 60201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	1
SOCIETY OF THORACIC SURGEONS	ASSOCIATE EXECUTIVE DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)		Date of Descipt
Mailing Address 31 CRESCENT LANE		Date of Receipt
City	Ctata Zin Cada	01 25 2016
City SUDBURY	State Zip Code MA 01776	Transaction ID : SA11AI.6661  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	-
MASSACHUSETTS GENERAL HOSPITAL	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
·	<u> </u>	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1230.00
TOTAL This Period (last page this line number	only)	

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	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC S	URGEONS POLITICAL ACTION CO	OMMITTEE
Full Name (Last, First, Middle Initial)  DR. RAYMOND L. SINGER		Date of Receipt
Mailing Address 3531 STURBRIDGE PLA	ACE	01 29 2016
City	State Zip Code	Transaction ID : SA11AI.6632
ALLENTOWN	PA 18104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	
LEHIGH VALLEY HEALTH NETWORK	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  DR. RUSSELL F. STAIR	•	Date of Receipt
Mailing Address 109 UPLAND TERRACE		M = M / D = D / Y = Y = Y
City	State Zip Code	01 26 2016 Transaction ID : \$A11A16768
CLARKS SUMMIT	PA 18411	Transaction ID : SA11AI.6768  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer GEISINGER HEALTH SYSTEM	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  DR. JESS L. THOMPSON	'	Date of Receipt
Mailing Address 14017 LOST CREEK DR	RIVE	01 25 _ 2016 _
City EDMOND	State Zip Code OK 73013	Transaction ID : SA11AI.6664  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
UNIVERSITY OF OKLAHOMA	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	al)	2250.00
TOTAL This Period (last page this line nun	opher only)	
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NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SURGEONS POLITICAL ACTION CO  Full Name (Last, First, Middle Initial) DR. SALIM M. WALJI Mailing Address BOX 4488  City State Zip Code	DATE OF Receipt
A. DR. SALIM M. WALJI  Mailing Address BOX 4488	Date of Receipt
City State Zip Code	01 24 2016
	Transaction ID : SA11AI.6689
ALBUQUERQUE NM 87107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	500.00
Name of Employer Occupation	†
LOVELACE MEDICAL CENTER PHYSICIAN	
Receipt For:  Aggregate Year-to-Date ▼	1
Primary General	
Other (specify) ▼ 500.00	
Full Name (Last, First, Middle Initial)  B. DR. ROBERT WELSH	Date of Receipt
Mailing Address 1160 LAKE ANGELUS SHORES	M M / D D / Y Y Y Y Y
City State Zip Code	01 26 2016 Transaction ID : SA11A1 6773
LAKE ANGELUS MI 48326	Transaction ID : SA11AI.6772
FFC ID symbol of contribution	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	1000.00
Name of Employer Occupation	1
BEAUMONT HEALTH PHYSICIAN	
Receipt For:  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 1000.00	
Full Name (Last, First, Middle Initial)  DR. RICHARD I. WHYTE	Date of Receipt
Mailing Address 5 LOEW CIRCLE	01 25 2016
City State Zip Code	Transaction ID : SA11AI.6665
MILTON MA 02186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	365.00
Name of Employer Occupation	+
BETH ISRAEL DEACONESS PHYSICIAN	
Receipt For:  Aggregate Year-to-Date ▼	7
Primary General	
Other (specify) ▼ 365.00	
	···
SUBTOTAL of Receipts This Page (optional)	1865.00

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LIN	E NUMB	ER: F	AGE	25 OF	29
(check or	nly one)				
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13	14	15	5	16	17

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or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	the name and address of any political committee to	o solicit contributions from such committee.
> SOCIETY OF THORACIC SU	RGEONS POLITICAL ACTION CC	OMMITTEE 
Full Name (Last, First, Middle Initial) DR. DAVID WORMUTH		Date of Receipt
Mailing Address 6781 MOREHOUSE FLATS	S ROAD	01 26 2016
City	State Zip Code	Transaction ID : SA11AI.6702
AMESVILLE	NY 13078	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
CNY THORACIC SURGERY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  DR. CAMERON D. WRIGHT		Date of Receipt
Mailing Address 734 EAST 8TH STREET		01 24 _2016 _
City	State Zip Code	Transaction ID : SA11AI.6690
SOUTH BOSTON	MA 02127	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	500.00
Name of Employer	Occupation	
MASSACHUSETTS GENERAL HOSPITAL	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)		
ROBERT A. WYNBRANDT		Date of Receipt
Mailing Address 921 DRYDEN LANE		01 24 2016
City HIGHLAND PARK	State Zip Code IL 60035	Transaction ID : SA11Al.6691  Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	500.00
Name of Employer	Occupation	-
SOCIETY OF THORACIC SURGEONS	EXECUTIVE DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional).		1500.00
TOTAL This Period (last page this line number	er only)	39785.00

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IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(0,		c only 21b		_					_ ae	
			Summary Page		×	210	22 28a	-	23 28b		24 28c	25	-	26 30b
Ar	ny information copied from such Reports and Staten	nents mav	not be sold or us	sed by a	anv			pur		of so			ution	
	for commercial purposes, other than using the name													
	NAME OF COMMITTEE (In Full)	0110 5	01 ITIO 11 :	OT: 0		00			_					
/	SOCIETY OF THORACIC SURGE	ONS PO	OLITICAL A	CHO	N	CO	MMH	IE	=					
_	Full Name (Last, First, Middle Initial)													
Α.	AMERICAN EXPRESS						Date of	of Di	sburse	mei	nt			
	Mailing Address P.O. BOX 53852				M = N	/	0		/ Y	2016	I Y			
							<b>V</b> .							
	•	State AZ	Zip Code				Tran	sact	ion ID	: SI	B21B.6	620		
	PHOENIX Purpose of Disbursement	AZ	85072											
	CREDIT CARD FEES			Ι.			Amour	nt of	Each	Dis	bursem	ent this	Per	iod
	Candidate Name			Cate		y/						23	32.39	,
	Office Sought: House Disbursen	nent For:		Ту	ре			-	7		7		2.00	
		Primary	General											
	President	Other (spe	cify) 🔻											
_	State: District:													
R	Full Name (Last, First, Middle Initial)  MERCHANT SERVICES						Date of	of Di	ehurea	mai	nt			
٥.	MERCHANT SERVICES						M = N			D		YYY	- Y	1
	Mailing Address 7300 CHAPMAN HIGHWAY						01			1	Ľ	2016	_	
	City State Zip Code						Tran	eact	ion ID	. e	B21B.6	706		
	KNOXVILLE Purpose of Disbursement	TN	37920				IIaII	Saci	טו ווטו.	. 3	<b>62 16.</b> (	700		
	CREDIT CARDS FEES						Amount of Each Disbursement this Period					iod		
	Candidate Name			Cate	aor	v/		-	-					
					pe	,		-	7	_	7	29	94.02	<u>-</u>
	Office Sought: House Disbursen Senate	nent For: Primary	General											
		Other (spe												
	State: District:		,											
_	Full Name (Last, First, Middle Initial)						<b>.</b>							
Ċ.	SQUARE						Date of							
	Mailing Address 1455 MARKET STREET						01	1 /	2		/   Y	2016	= Y	
	,	State CA	Zip Code 94103				Tran	sact	ion ID	: S	B21B.6	751		
	Purpose of Disbursement		000		-	$\overline{}$								
	CREDIT CARD FEES						Amour	nt of	Each	Dis	bursem	ent this	Per	iod
	Candidate Name Cate											23	86.55	5
	Office Sought: House Disbursen	nent For:		1 9	рс				7		7			_
		Primary	General											
	State: President State:	Other (spe	cify) ▼											
Г	State. District.								_					_
s	SUBTOTAL of Disbursements This Page (optional)					•			T	-	400	76	2.96	
H						_	_		7		7	-		一
T	<b>OTAL</b> This Period (last page this line number only)					•			7		- 7		-	

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SCHEDULE B (FEC Form 3X)		EOD LINE N	NUMBER: PAGE 27 OF 29						
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	VOIVIBEI 1:						
TIEMIZED DIODOTIOEMENTO	for each category of the Detailed Summary Page	X 21b 27		26 30b					
Any information copied from such Reports and Stater or for commercial purposes, other than using the name	nents may not be sold or used ne and address of any politica	d by any perso I committee to	on for the purpose of soliciting contributions solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SURGE	ONS POLITICAL AC	TION COI	MMITTEE						
Full Name (Last, First, Middle Initial)									
A. SQUARE			Date of Disbursement						
Mailing Address 1455 MARKET STREET	7. 0. 1		01 26 2016						
City SAN FRANCISCO	State Zip Code CA 94103		Transaction ID : SB21B.6750						
Purpose of Disbursement	34103								
CREDIT CARD FEES			Amount of Each Disbursement this Period	i					
Candidate Name		Category/ Type	128.73						
Office Sought: House Disburser  Senate President	nent For:  Primary General  Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement						
Mailing Address	Mailing Address								
City									
Purpose of Disbursement			Amount of Each Disbursement this Period						
Candidate Name		Category/ Type							
Office Sought: House Disburser  Senate President	nent For:  Primary General  Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial)  C.			Date of Disbursement						
Mailing Address			M M / D D / Y Y Y Y						
City	State Zip Code								
Purpose of Disbursement			Amount of Each Disbursement this Period	4					
Candidate Name	,	Category/ Type		7					
Office Sought:    House   Disburser	nent For: Primary General Other (specify)			1					
State. District.				_					
SUBTOTAL of Disbursements This Page (optional)		······	128.73	-					
TOTAL This Period (last page this line number only)			891.69						

SC	CHEDULE B (FEC Form 3X)			FOR LINE	INE NUMBER: PAGE 28 OF 29					
	EMIZED DISBURSEMENTS	Use separate scl		(check only	NOMBER:					
111		for each category		21b	22 🔀 23 24 25 26					
		Detailed Summa	ry Page	27	28a 28b 28c 29 30b					
An	y information copied from such Reports and Staten	nents may not be s	sold or used	by any perso	on for the purpose of soliciting contributions					
	for commercial purposes, other than using the nam									
	NAME OF COMMITTEE (In Full)									
$ \rangle$	SOCIETY OF THORACIC SURGE	ONS POLITION	CAL AC	TION CO	MMITTEE					
$\angle$										
	Full Name (Last, First, Middle Initial)				Date of Disbursement					
Λ.	BRADY FOR CONGRESS									
	Mailing Address P.O. BOX 8277				01 08 2016					
	,	State Zip Co			Transaction ID : SB23.6622					
	THE WOODLANDS	TX 77387	7		1141134Ction ID . 3D23.0022					
	Purpose of Disbursement CONTRIBUTION				Amount of Each Disbursement this Period					
	Candidate Name		[.		Amount of Lacif Dispulsement this Period					
	KEVIN BRADY			Category/ Type	1000.00					
		nent For: 2016		.,,,,,						
	Senate	Primary	General							
	President	Other (specify)								
	State: TX District: 08									
_	Full Name (Last, First, Middle Initial)				D (D) .					
В.	FRIENDS OF JOE HECK				Date of Disbursement					
	Mailing Address P.O. BOX 753908				01 29 2016					
	Maining /1441033 F.O. DOX /33806				01 20 2010					
	City	State Zip Co	ode		Transaction ID : SB23.6741					
	LAS VEGAS	NV 89136	6		11a115activii ID . 3D23.0/41					
	Purpose of Disbursement CONTRIBUTION				Amount of Each Dights amont this Deviced					
	Candidate Name		[.		Amount of Each Disbursement this Period					
	JOE HECK			Category/ Type	1000.00					
		nent For: 2016		.,,,,	, , , , , , , , , , , , , , , , , , , ,					
			General							
	President	Other (specify) ▼								
	State: NV District: 00									
	Full Name (Last, First, Middle Initial)				D					
C.	GENE GREEN CONGRESSIONAL	_ CAMPAIGN			Date of Disbursement					
	Mailing Address P.O. BOX 16128				01 29 2016					
	Maining Address F.O. DOX 10120				20 2010					
	City	State Zip Co	ode		Transaction ID - SP22 5727					
		TX 77222	2		Transaction ID : SB23.6737					
	Purpose of Disbursement CONTRIBUTION									
	Candidate Name				Amount of Each Disbursement this Period					
	RAYMOND E. 'GENE' GREEN			Category/ Type	1000.00					
		nent For: 2016		1 y p c	7					
			General							
	President	Other (specify)								
	State: TX District: 29									
s	UBTOTAL of Disbursements This Page (optional)				3000.00					
_	OTAL The December 1									
l T	<b>OTAL</b> This Period (last page this line number only)									

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SCHEDULE B (FEC Form 3X)	Hee consists askedular()	FOR LINE I	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one)  22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	ie and address of any pointe	ai committee to	Solicit contributions from Such committee.
SOCIETY OF THORACIC SURGE	ONS POLITICAL AG	CTION CO	MMITTEE
Full Name (Last, First, Middle Initial)			Date of Disbursement
A. KEVIN MCCARTHY FOR CONGRESS			M M / D D / Y Y Y Y
Mailing Address P.O. BOX 12667			01 15 2016
	State Zip Code		Transaction ID : SB23.6626
BAKERSFIELD Purpose of Disbursement	CA 93389		
CONTRIBUTION			Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
KEVIN MCCARTHY  Office Sought:	nent For: 2016	Туре	2300.00
	Primary General		
President	Other (specify) ▼		
State: CA District: 23			
Full Name (Last, First, Middle Initial)	TTEE		Date of Disbursement
B. PORTMAN FOR SENATE COMMITTEE			M M / D D / Y Y Y Y
Mailing Address 9856 ARCHER LANE			01 29 2016
City S DUBLIN Purpose of Disbursement	State Zip Code OH 43017		Transaction ID : SB23.6744
CONTRIBUTION			Amount of Each Disbursement this Period
Candidate Name Category/			4000.00
ROB PORTMAN Type			1000.00
	nent For: 2016  Primary General  Other (specify) ▼		
Full Name (Last, First, Middle Initial)  C. RYAN FOR CONGRESS			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. BOX 1488		01 08 2016	
City S JANESVILLE	State Zip Code WI 53547		Transaction ID : SB23.6623
Purpose of Disbursement CONTRIBUTION			
Candidata Nama			Amount of Each Disbursement this Period
PAUL D. RYAN  Category/ Type			2500.00
Office Sought:    House   Disburser	nent For: 2016 Primary General Other (specify)	71	
SUBTOTAL of Disbursements This Page (optional)		······	6000.00
TOTAL This Period (last page this line number only)		······	9000.00